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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:		Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	rite the name that is on ur government-issued sture identification (for ample, your driver's	Nerijust First name	First name
		ise or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Surdokas Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ide your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer tification number	xxx-xx-3998	

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Case number (if known)

Debtor 1 Nerijust Surdokas

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	2710 Dove Street Rolling Meadows, IL 60008	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cook	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
ò.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Nerijust Surdokas

Case number (if known)

ar	Tell the Court About	Your B	ankruptcy Ca	ise		
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	choosing to file under	■ Cł	hapter 7			
		☐ Ch	hapter 11			
		☐ Ch	hapter 12			
		□ CI	hapter 13			
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with
					allments. If you choose this options (Official Form 103A).	n, sign and attach the Application for Individuals to Pay
			I request that but is not req	at my fee be wa uired to, waive y	ived (You may request this option our fee, and may do so only if you	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out
						ial Form 103B) and file it with your petition.
).	Have you filed for bankruptcy within the	■ No				
	last 8 years?	☐ Ye			Whon	Coco number
			District		When When	Case number Case number
			District District		When	Case number Case number
			District		when	Case number
0.	Are any bankruptcy cases pending or being	■ No)			
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.			
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
11.	Do you rent your residence?	■ No	Go to I	ine 12.		
		☐ Ye	s. Has yo	our landlord obta	ined an eviction judgment against	t you and do you want to stay in your residence?
				No. Go to line	12.	
				Yes. Fill out <i>Ini</i> bankruptcy pet		Judgment Against You (Form 101A) and file it with this

Deb	otor 1 Nerijust Surdokas	· · · · · ·		Document	Page 4 of 70	Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own	as a Sole Proprietor		
12.	Are you a sole proprietor of any full- or part-time business?	□ No.	Go to	Part 4.		
		Yes.	Name	and location of business		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	ust Surdokas of business, if any		
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Rollii Numb	Dove Street ng Meadows, IL 60008 er, Street, City, State & ZIP at the appropriate box to des		
	·			Health Care Business (as	•	101(27A))
				Single Asset Real Estate	(as defined in 11 U.S.C	:. § 101(51B))
				Stockbroker (as defined in	n 11 U.S.C. § 101(53A))
				Commodity Broker (as de	fined in 11 U.S.C. § 10	1(6))
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you in	dicate that you are a small ow statement, and federal in	business debtor, you n	are a small business debtor so that it can set appropriate nust attach your most recent balance sheet, statement of ny of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.		I am NOT a small busii	ness debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter 11 and	I am a small business	debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any Prope	erty That Needs Imme	diate Attention
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?		
	public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or					

Number, Street, City, State & Zip Code

Where is the property?

livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Nerijust Surdokas

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	Nerijust Surdokas	•			Case number (if	known)		
Par	t 6: Answer These Quest	ions for Repo	rting Purposes					
16.	What kind of debts do you have?		e your debts primarily consu lividual primarily for a personal			in 11 U.S.C. § 101(8) as "incurred by an		
			No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			No. Go to line 16c.					
			Yes. Go to line 17.					
		16c. Sta	ate the type of debts you owe th	nat are not consu	mer debts or business d	ebts		
17.	Are you filing under Chapter 7?	□ No. la	m not filing under Chapter 7. G	o to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses	— res. are	m filing under Chapter 7. Do yo e paid that funds will be availab	ou estimate that a le to distribute to	fter any exempt property unsecured creditors?	is excluded and administrative expenses		
	are paid that funds will be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do you estimate that you owe?	☐ 1-49 ■ 50-99 ☐ 100-199 ☐ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,0	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	\$0 - \$50,0 \$50,001 - \$100,001 \$500,001	\$100,000 - \$500,000	\$1,000,001 \$10,000,000 \$50,000,000 \$100,000,000	1 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	□ \$0 - \$50,0 ■ \$50,001 □ \$100,001 □ \$500,001	- \$100,000 - \$500,000	\$1,000,001 \$10,000,000 \$50,000,000 \$100,000,000	1 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Par	t 7: Sign Below							
For you		I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
						der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.		
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request reli	ef in accordance with the chapt	er of title 11, Unit	ed States Code, specifie	ed in this petition.		
		bankruptcy of and 3571.	ase can result in fines up to \$2			roperty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Nerijust Nerijust Su Signature of	ırdokas		Signature of Debtor 2			
		Executed on	May 9, 2017 MM / DD / YYYY		Executed on MM / D	D/YYYY		

Debtor 1 Nerijust Surdokas Document Page 7 of 70 Case number (if known)

Bar number & State

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alexey Y. Kaplan (Kaplan Law Offices, P.C.) Date	May 9, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Alexey Y. Kaplan (Kaplan Law Offices, P.C.)		
Printed name		
Kaplan Law Offices, P.C.		
Firm name		
3400 Dundee Road		
Suite 150		
Northbrook, IL 60062		
Number, Street, City, State & ZIP Code		
Contact phone (847) 509-9800	Email address	alex@alexkaplanlegal.com
6272494		

		Docume	ent Page 8 of 70	
Fill in this inform	ation to identify your	case:		
Debtor 1	Nerijust Surdoka	s		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,550.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,550.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	28,436.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	40,398.00
	Your total liabilities	\$	68,834.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,587.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,355.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Value dabte are primarily consumer dabte. Consumer date are those (in sound by one in dividual primarily for		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Nerijust Surdokas

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Case number (if known)

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$_____1,587.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	28,436.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	28,436.00

		Document	t Page 10 of 70	
Fill in this infor	mation to identify your	case and this filing:		
Debtor 1	Nerijust Surdoka	ıs		
20210	First Name	Middle Name	Last Name	
Debtor 2	First Name	Middle None	Lost Nome	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case number				☐ Check if this is an
				amended filing
				-
Official Ea	rm 1061/P			
	orm 106A/B			
Schedul	le A/B: Prop	perty		12/15
think it fits best. Enformation. If mor Answer every ques	Be as complete and accurre space is needed, attach stion.	ate as possible. If two married p	e. If an asset fits in more than one category, list the beople are filing together, both are equally responsion the top of any additional pages, write your name	ble for supplying correct
l. Do you own or	have any legal or equitable	le interest in any residence, buil	lding, land, or similar property?	
■ No. Go to Par	rt 2.			
☐ Yes. Where i	is the property?			
Part 2: Describe	Your Vehicles			
			les, whether they are registered or not? Inclu G: Executory Contracts and Unexpired Leases.	de any vehicles you own that
3. Cars, vans, tr	rucks, tractors, sport u	tility vehicles, motorcycles		
■ No				
☐ Yes				
•			vehicles, other vehicles, and accessories ls, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			ies from Part 2, including any entries for	\$0.00
.pages vou ha	ave attached for Part 2	. Write that number here		
1				
	V	.1.116		
Part 3: Describe	Your Personal and Hous		ollowing items?	Current value of the
Part 3: Describe Do you own or	have any legal or equi	sehold Items table interest in any of the fo	ollowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 3: Describe Do you own or 6. Household go Examples: Ma	have any legal or equitons on the second on the second second furnishings ajor appliances, furniture		ollowing items?	portion you own? Do not deduct secured
Part 3: Describe Do you own or 6. Household go Examples: Ma	have any legal or equitons on the second on the second second furnishings ajor appliances, furniture	table interest in any of the fo	ollowing items?	<pre>portion you own? Do not deduct secured</pre>

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

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Case number (if known)

Document **Nerijust Surdokas**

	Cellphone, computer, I-pad, printer, television, lap-top	\$500.0
Examp ■ No	tibles of value oles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stam other collections, memorabilia, collectibles b. Describe	p, coin, or baseball card collections;
	nent for sports and hobbies oles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; of musical instruments	canoes and kayaks; carpentry tools;
	s. Describe	
■ No	rms nples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
☐ No	es nples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories b. Describe	
	Necessary and ordinary wearing apparel	\$250.0
13. Non-f a	arm animals	
— 140	nples: Dogs, cats, birds, horses	
	nples: Dogs, cats, birds, horses b. Describe	
☐ Yes. 14. Any o		t list
☐ Yes. 14. Any or ■ No ☐ Yes. 15. Add	s. Describe other personal and household items you did not already list, including any health aids you did not	
☐ Yes. 14. Any or ■ No ☐ Yes. 15. Add for P	ther personal and household items you did not already list, including any health aids you did not so Give specific information The dollar value of all of your entries from Part 3, including any entries for pages you have attacked at 3. Write that number here	ned \$1,500.00
☐ Yes. 14. Any or ■ No ☐ Yes. 15. Add for P	ther personal and household items you did not already list, including any health aids you did not so Give specific information The dollar value of all of your entries from Part 3, including any entries for pages you have attacked at 3. Write that number here	Current value of the portion you own?
☐ Yes. 14. Any or ■ No ☐ Yes. 15. Add for P Part 4: De Do you or 16. Cash Exam ☐ No	ther personal and household items you did not already list, including any health aids you did not so Give specific information The dollar value of all of your entries from Part 3, including any entries for pages you have attacked at 3. Write that number here	Current value of the portion you own? Do not deduct secured claims or exemptions.

☐ No

	Case 17-12	+746 DOC 1	Document	Page 12 of 70	to Descivialii
Debtor 1	Nerijust Surdo	okas	Bocament	Case number (if kr.	own)
■ Yes			Institution	name:	
		17.1. Checking	BMO Ha	rris Bank	\$2,000.0
18. Bond s	s, mutual funds, or	publicly traded sto	ocks		
<i>Exam</i> ■ No	nples: Bond funds, in	vestment accounts v	with brokerage firms, mo	ney market accounts	
☐ Yes		Institution or	issuer name:		
	oublicly traded stoc venture	k and interests in i	ncorporated and uninc	corporated businesses, including an in	terest in an LLC, partnership, an
■ No					
☐ Yes	. Give specific inform	mation about them Name of entity:		% of ownership:	
Nego Non-i	<i>tiable instruments</i> in	clude personal chec	ks, cashiers' checks, pro	negotiable instruments omissory notes, and money orders. by signing or delivering them.	
■ No □ Yes	. Give specific inforn	nation about them Issuer name:			
	ement or pension and apples: Interests in IRA		01(k), 403(b), thrift saving	gs accounts, or other pension or profit-sha	aring plans
	. List each account s	separately. Type of account:	Institution	name:	
Your		deposits you have m		ntinue service or use from a company ectric, gas, water), telecommunications co	mpanies, or others
■ No □ Yes	i		Institution	name or individual:	
23. Annui	ities (A contract for a	a periodic payment o	of money to you, either for	or life or for a number of years)	
■ No	(- p			
☐ Yes	Issu	er name and descrip	tion.		
	sts in an education S.C. §§ 530(b)(1), 52			ogram, or under a qualified state tuitio	n program.
■ No □ Yes	Insti	tution name and des	cription. Separately file t	the records of any interests.11 U.S.C. § 5.	21(c):
25. Trust : ■ No	s, equitable or futu	re interests in prop	erty (other than anythi	ng listed in line 1), and rights or power	s exercisable for your benefit
	. Give specific inform	mation about them			
-	, , , ,	,	ets, and other intellect proceeds from royalties	ual property and licensing agreements	
■ No	. Give specific inform				
27. Licen	ses, franchises, an	d other general inta	angibles	on holdings, liquor licenses, professional l	icaneae
■ No	. Give specific infor	·	•	ni moraliyo, ilquvi ilodiloco, professional i	10011000
	·				• • • • • • •
Money or	r property owed to	you?			Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

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Case number (if known) Document Debtor 1 **Nerijust Surdokas** 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No $\hfill \square$ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,050.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

page 4

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_	Do you have other property of any kind you did not already Examples: Season tickets, country club membership	y list?		
	No			
L	☐ Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Wri	ite that r	umber here	\$0.00
Par	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00	
57.	Part 3: Total personal and household items, line 15		\$1,500.00	
58.	Part 4: Total financial assets, line 36		\$2,050.00	
59.	Part 5: Total business-related property, line 45		\$0.00	
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00	
61.	Part 7: Total other property not listed, line 54	+	\$0.00	

\$3,550.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$3,550.00

\$3,550.00

		17(141111)	111 1000 1010	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nerijust Surdoka	s		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				☐ Check if this is
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemp	tions are y	ou claiming?	Check one only	, even if	your spouse is	s filing with	you.
----	--------------------	-------------	--------------	----------------	-----------	----------------	---------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
General and ordinary household goods	\$750.00	•	\$750.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Cellphone, computer, I-pad, printer, television, lap-top	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Necessary and ordinary wearing apparel	\$250.00		\$250.00	735 ILCS 5/12-1001(a) .
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
Checking: BMO Harris Bank Line from Schedule A/B: 17.1	\$2,000.00		\$2,000.00	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	

Case 17-14746 Filed 05/11/17 Desc Main Entered 05/11/17 08:59:10 Document Page 16 of 70 Debtor 1 Nerijust Surdokas Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Doc 1

No

Yes

		1717111	3.11 1.11.11 1.11 1.11 1.11 1.11 1.11 1	
Fill in this infor	mation to identify your	case:		
Debtor 1	Nerijust Surdoka	s		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

			Document	Page	18.01	70	Ī	
Fill in this informat	ion to identify your c	ase:					l	
Debtor 1	Nerijust Surdokas	i						
_	First Name	Middle N	lame	Last Nam	Э			
Debtor 2 (Spouse if, filing)	First Name	Middle N	lame	Last Nam	۵			
United States Bankro	uptcy Court for the:	NORTHER	N DISTRICT OF ILLI	NOIS				
Case number								
(if known)							☐ Check	if this is an
							amend	ed filing
Official Form 1	IOSE/F							
	: Creditors W	ho Have	Unsecured (laim	e			12/15
	curate as possible. Use					or creditors with NON	PRIORITY claims. Li	
ny executory contract	ts or unexpired leases t	that could res	ult in a claim. Also list	t executo	ry contrac	ts on Schedule A/B: F	Property (Official For	m 106A/B) and on
	y Contracts and Unexpi Who Have Claims Secu							
eft. Attach the Continuname and case numbe	uation Page to this page	e. If you have	no information to repo	rt in a Pa	rt, do not	file that Part. On the t	op of any additional	pages, write your
	f Your PRIORITY Uns	secured Cla	me					
	have priority unsecured							
□ No. Go to Part 2		. J.Lio agaili	,					
Yes.	=:							
	ority unsecured claims	If a creditor h	as more than one priority	v unsecu	red claim li	st the creditor senarate	ly for each claim. For	each claim listed
identify what type of	of claim it is. If a claim has	s both priority a	and nonpriority amounts,	, list that o	claim here a	and show both priority a	and nonpriority amount	s. As much as
	aims in alphabetical order n one creditor holds a par				ore than tv	vo priority unsecured cl	aims, fill out the Contir	nuation Page of
(For an explanation	n of each type of claim, se	ee the instructi	ons for this form in the ir	nstruction	booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1 Illinois De	part of Revenue	L	ast 4 digits of account	number	3998	\$1,536.00	\$1,536.00	\$0.0
Priority Credite	or's Name		Ū					
PO Box 19		W	hen was the debt incu	irred?	2016		-	
	d, IL 62794-9025 t City State ZIp Code	Α	s of the date you file, t	he claim	is: Check	all that apply		
Who incurred the	e debt? Check one.		Contingent					
Debtor 1 only		_	Unliquidated					
☐ Debtor 2 only		_	Disputed					
Debtor 1 and	Debtor 2 only		ype of PRIORITY unsec	cured cla	ıim:			
_	•	-	Domestic support oblig					
	f the debtors and another	<u>_</u>		•				
☐ Check if this Is the claim subj	claim is for a communi	•	Taxes and certain other Claims for death or pe	-		-		
No	ject to onset?		•	isonai inj	ury writte y	ou were intoxicated		
☐ Yes		L	Other. Specify Stat	te inco	me tax			
	part of Revenue	L	ast 4 digits of account	number	3998	\$1,942.00	\$1,942.00	\$0.0
Priority Credito			(h	10				
PO Box 19 Springfield	d, IL 62794-9025	V	hen was the debt incu	irrear			-	
Number Stree	t City State Zlp Code		s of the date you file, t	he claim	is: Check	all that apply		
Who incurred the	e debt? Check one.		Contingent					
Debtor 1 only			Unliquidated					
Debtor 2 only		Γ	Disputed					
Debtor 1 and	Debtor 2 only		ype of PRIORITY unsec	cured cla	ıim:			
	f the debtors and another	r [Domestic support oblig	gations				
	claim is for a communi	_	Taxes and certain other	er dehte v	OU OWE the	a government		
Is the claim subj		•	Claims for death or pe	-		_		
No	,		Other. Specify		, y			
☐ Yes		_		eral in	come tax	(

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				_		
2.3	Internal Revenue Service	Last 4 digits of account number	3998	\$24,958.00	\$24,958.00	\$0.00
	Priority Creditor's Name PO Box 970006	When was the debt incurred?	2015			
	Saint Louis, MO 63197-0006					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check a	all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the	government		
	Is the claim subject to offset?	Claims for death or personal inj	ury while yo	u were intoxicated		
	No	☐ Other. Specify				
	Yes	Federal inc	ome tax			
Part	2: List All of Your NONPRIORITY Unsecu	urad Claims				
	Do any creditors have nonpriority unsecured claim					
	_					
	\square No. You have nothing to report in this part. Submit	this form to the court with your other s	chedules.			
	Yes.					
	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c					
t	han one creditor holds a particular claim, list the other					
	Part 2.				Total cl	aim
	1				TOTAL CI	
4.1	Armor Systems Co	Last 4 digits of account numb	er <u>6465</u>	<u> </u>		\$1,252.00
	Nonpriority Creditor's Name 1700 Kiefer Dr		One	ned 01/13 Last Ac	tive	
	Ste 1	When was the debt incurred?	09/1		LIVE	
	Zion, IL 60099					
	Number Street City State Zlp Code	As of the date you file, the cla	i m is: Chec	k all that apply		
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecu	ıred claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a s	eparation a	greement or divorce that	you did not	
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sh	aring plans,	and other similar debts		
	☐ Yes	Other Specify Medical	Debt Sw	edish Covenan		

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Debtor 1 Nerijust Surdokas 4.2 \$913.00 ARS/Account Resolution Specialist Last 4 digits of account number 5098 Nonpriority Creditor's Name Opened 12/15 Last Active Po Box 459079 When was the debt incurred? 11/14 Sunrise, FL 33345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Debt Mea Elk Grove L Other. Specify 4.3 **ARS/Account Resolution Specialist** Last 4 digits of account number 5097 \$913.00 Nonpriority Creditor's Name Opened 12/15 Last Active Po Box 459079 When was the debt incurred? 12/14 Sunrise, FL 33345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt Mea Elk Grove L ☐ Yes 4.4 ARS/Account Resolution Specialist Last 4 digits of account number \$901.00 4331 Nonpriority Creditor's Name Opened 12/13 Last Active Po Box 459079 When was the debt incurred? 05/12 Sunrise, FL 33345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Debt Mea Elk Grove L ☐ Yes

Page 21 of 70 Case number (if know) Document Debtor 1 Nerijust Surdokas 4.5 \$942.00 ARS/Account Resolution Specialist Last 4 digits of account number 6413 Nonpriority Creditor's Name Opened 10/13 Last Active Po Box 459079 When was the debt incurred? 03/12 Sunrise, FL 33345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Debt Midwest Emergen** Other. Specify 4.6 **ARS/Account Resolution Specialist** Last 4 digits of account number 6409 \$413.00 Nonpriority Creditor's Name Opened 10/13 Last Active Po Box 459079 When was the debt incurred? 03/12 Sunrise, FL 33345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt Mea Elk Grove L ☐ Yes 4.7 ARS/Account Resolution Specialist Last 4 digits of account number \$958.00 6410 Nonpriority Creditor's Name Opened 10/13 Last Active Po Box 459079 When was the debt incurred? 03/12 Sunrise, FL 33345 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

Other, Specify

 \square Debts to pension or profit-sharing plans, and other similar debts

Medical Debt Mea Elk Grove L

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Debtor 1 Nerijust Surdokas 4.8 \$47.00 Atq Credit Llc Last 4 digits of account number 2621 Nonpriority Creditor's Name 1700 W Cortland St Opened 01/14 Last Active Ste 2 When was the debt incurred? 05/13 Chicago, IL 60622 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Winfield Radiol ☐ Yes 4.9 **Atg Credit LIc** Last 4 digits of account number \$47.00 2538 Nonpriority Creditor's Name 1700 W Cortland St Opened 10/13 Last Active Ste 2 When was the debt incurred? 09/13 Chicago, IL 60622 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Winfield Radiol ☐ Yes 4.1 Cda/Pontiac \$340.00 8291 Last 4 digits of account number Nonpriority Creditor's Name Attn:Bankruptcy When was the debt incurred? **Opened 07/15** Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Collection Attorney Elk Grove Radiology ☐ Yes

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Debtor 1 Nerijust Surdokas 4.1 Cda/Pontiac 7163 \$364.00 Last 4 digits of account number Nonpriority Creditor's Name Attn:Bankruptcy When was the debt incurred? **Opened 09/12** Po Box 213 Streator, IL 61364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Wellington Radiology ☐ Yes Other. Specify **Group Sc** 4.1 \$25.00 **Choice Recovery Inc** 5027 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/12 Last Active 1550 Old Henderson Rd Ste 100 When was the debt incurred? 04/11 Columus, OH 43220 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Associated Card ☐ Yes 4.1 **Commonwealth Financial Systems** \$395.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 10/14 Last Active 245 Main St When was the debt incurred? 08/11 Dickson City, PA 18519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Π Yes ■ Other. Specify Collection Attorney Mea-Stjoseph

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Document Page 24 of 70 Debtor 1 Nerijust Surdokas Case number (if know) 4.1 \$995.00 **Commonwealth Financial Systems** 94N1 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 10/14 Last Active 245 Main St When was the debt incurred? 07/11 Dickson City, PA 18519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Mea-Stalexius** Other, Specify Harris & Harris 1723 \$1,752.00 Last 4 digits of account number Nonpriority Creditor's Name 111 W Jackson Blvd When was the debt incurred? Suite 400 Chicago, IL 60604 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Medical 4.1 7001 \$626.00 IC Systems, Inc Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 09/13 Last Active 444 Highway 96 East When was the debt incurred? 01/12 St Paul, MN 55127 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

Official Form 106 E/F

debt

■ No

☐ Yes

report as priority claims

lacksquare Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Collection Attorney Nw Cardiovascul

Is the claim subject to offset?

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Debtor 1 Nerijust Surdokas 4.1 \$286.00 **ICS/Illinois Collection Service** 0365 Last 4 digits of account number Nonpriority Creditor's Name Po Box 1010 When was the debt incurred? **Opened 09/15** Tinley Park, IL 60477 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Wellington Radiology ☐ Yes Other. Specify 4.1 M3 Financial Services 9393 \$26.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 10330 W Roosevelt Rd. Suite 200 When was the debt incurred? **Opened 04/14** Westchester, IL 60154 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Watermark Physician ☐ Yes Other. Specify Services 4.1 Med Business Bureau 0005 \$637.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 12/15 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 04/15 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Collection Attorney Tricounty Emrg ☐ Yes

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Debtor 1 Nerijust Surdokas 4.2 Med Business Bureau 0004 \$694.00 Last 4 digits of account number 0 Nonpriority Creditor's Name Opened 12/15 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 04/15 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Tricounty Emrg** Other, Specify 4.2 Med Business Bureau 0003 \$637.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/13 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 01/13 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Tricounty Emrg** Other, Specify 4.2 Med Business Bureau 0002 \$637.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/12 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 05/12 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other Specify Collection Attorney Tricounty Emrg ☐ Yes

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Debtor 1 Nerijust Surdokas 4.2 Med Business Bureau \$407.00 0001 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 07/12 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 03/12 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Tricounty Emrg** Other, Specify 4.2 Med Business Bureau 5540 \$682.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/13 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 09/12 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Swedish Emergen** Other, Specify 4.2 Med Business Bureau 1477 \$1,522.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 08/13 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 04/13 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Central Dupage ☐ Yes

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Debtor 1 Nerijust Surdokas 4.2 Med Business Bureau 1129 \$979.00 Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 01/14 Last Active 1460 Renaissance Dr #400 When was the debt incurred? 09/13 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Collection Attorney Central Dupage** Other, Specify 4.2 **Merchants Credit** 0866 \$56.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd Opened 01/13 Last Active Ste 700 When was the debt incurred? 09/12 Chicago, IL 60606 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Acute Care Specialists ☐ Yes Other. Specify li Ltd 4.2 **Merchants Credit** \$58.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd Opened 01/13 Last Active Ste 700 When was the debt incurred? 09/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Collection Attorney Acute Care Specialists Other. Specify li Ltd ☐ Yes

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Debtor 1 Nerijust Surdokas 4.2 **Merchants Credit** 0864 \$574.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 01/13 Last Active Ste 700 When was the debt incurred? 09/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Acute Care Specialists** ☐ Yes Other. Specify 4.3 **Merchants Credit** \$446.00 1492 Last 4 digits of account number 0 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 01/13 Last Active Ste 700 When was the debt incurred? 07/11 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collection Attorney Edward Hospital 4.3 **Merchants Credit** 0534 \$3,212.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd Opened 01/12 Last Active Ste 700 When was the debt incurred? 11/10 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Adventist Hinsdale** ☐ Yes Other. Specify Hospital

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Case number (if know) Debtor 1 Nerijust Surdokas 4.3 \$900.00 **Merchants Credit** 0619 Last 4 digits of account number 2 Nonpriority Creditor's Name 223 W Jackson Blvd Opened 10/13 Last Active Ste 700 When was the debt incurred? 09/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Adventist Glenoaks** ☐ Yes Other. Specify Hospital 4.3 **Merchants Credit** \$444.00 5308 Last 4 digits of account number Nonpriority Creditor's Name 223 W Jackson Blvd Opened 12/12 Last Active Ste 700 When was the debt incurred? 02/12 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection Attorney Dupage Medical Group ☐ Yes 4.3 Midland Funding 0978 \$1,447.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? c/o Blatt Hasenmiller Leibsker & M 125 S. Wacker Drive, Ste. 400 Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Credit card; ex-parte judgment entered on ■ Other. Specify 1-8-2013 ☐ Yes

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Debtor 1 Nerijust Surdokas Case number (if know) 4.3 Miramed Revenue Group 9824 \$997.00 Last 4 digits of account number 5 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.3 Miramed Revenue Group 6200 \$3,705.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.3 Miramed Revenue Group 8280 \$355.00 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

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Debtor 1 Nerijust Surdokas 4.3 \$431.00 Miramed Revenue Group 8033 Last 4 digits of account number 8 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt lacksquare Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes 4.3 Miramed Revenue Group 1251 \$524.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.4 Miramed Revenue Group 6709 \$1.752.00 0 Last 4 digits of account number Nonpriority Creditor's Name 991 Oak Creek Dr When was the debt incurred? Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical Other. Specify

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Debto	Nerijust Surdokas	———————	Case number (if know)				
4.4	Miramed Revenue Group	Last 4 digits of account number	7104	\$1,755.00			
1	Nonpriority Creditor's Name 991 Oak Creek Dr	When was the debt incurred?		Ψ1,100.00			
	Lombard, IL 60148	When was the dest mounted.					
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plane, and other similar debte				
	■ No		ig plans, and other similar debts				
	☐ Yes	■ Other. Specify Medical					
4.4 2	Northwest Collectors	Last 4 digits of account number	4407	\$475.00			
	Nonpriority Creditor's Name		Opened 10/12 Last Active				
	3601 Algonquin Rd Ste 232 Rolling Meadows, IL 60008	When was the debt incurred?	05/12 Last Active				
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	■ Other. Specify	Attorney Rolling Meadows Fire				
	Stanislaus Credit Control Service,						
3	Inc.	Last 4 digits of account number	81N1	\$642.00			
	Nonpriority Creditor's Name	_		·			
	Po Box 480 Modesto, CA 95353	When was the debt incurred?	Opened 02/14 Last Active 11/13				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
		_ '					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:				
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	and the second of diverse that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	□Yes	Other Specify Medical De	bt Cep America III				

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	Nerijust Suruokas		Case Harriber (ii know)				
1.4 1	Stanislaus Credit Control Service, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	76N1	\$439.00			
	Po Box 480 Modesto, CA 95353	When was the debt incurred?	Opened 06/14 Last Active 03/14				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Medical De	bt Cep America III				
1.4	Stanislaus Credit Control Service, Inc.	Last 4 digits of account number	59N1	\$640.00			
	Nonpriority Creditor's Name		Opened 03/15 Last Active				
	Po Box 480 Modesto, CA 95353	When was the debt incurred?	01/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify Medical De	bt Cep America III				
1.4	Stanislaus Credit Control Service,		0414	\$420.00			
5	Inc. Nonpriority Creditor's Name	Last 4 digits of account number	<u>81N1</u>	\$439.00			
	Po Box 480 Modesto, CA 95353	When was the debt incurred?	Opened 04/15 Last Active 02/15				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other, Specify Medical De	bt Cep America III				

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Case number (if know)

Debtor	1 Nerijust Surdokas		Case number (if know)			
4.4	Stanislaus Credit Control Service, Inc.	Last 4 digits of account number	28N1	\$732.00		
	Nonpriority Creditor's Name Po Box 480 Modesto, CA 95353 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim i				
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent				
	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans				
	debt Is the claim subject to offset? ■ No	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Medical De				
4.4	Stanislaus Credit Control Service, Inc.	Last 4 digits of account number	05N1	\$452.00		
	Nonpriority Creditor's Name Po Box 480 Modesto, CA 95353	When was the debt incurred?	Opened 10/16 Last Active 07/16			
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin				
	□Yes	Other Specify Medical De				
4.4	Stanislaus Credit Control Service, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	55N1	\$687.00		
	Po Box 480 Modesto, CA 95353 Number Street City State ZIp Code	When was the debt incurred?	Opened 12/15 Last Active 09/15			
	Who incurred the debt? Check one.	As of the date you file, the claim i				
	Debtor 1 only	Contingent				
	Debtor 2 only	Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not 				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other Specify Medical Debt Cep America III				

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Debtor	1 Nerijust Surdokas	——————	Case number (if know)				
4.5	Stanislaus Credit Control Service, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	76N1		\$439.00		
	Po Box 480 Modesto, CA 95353	When was the debt incurred?	Opened 05/14 Last Active 03/14				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa					
		report as priority claims Debts to pension or profit-sharin					
	■ No	·					
	☐ Yes	Other. Specify Medical Debt Cep America III					
4.5	Stanislaus Credit Control Service, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	81N1		\$642.00		
	Po Box 480 Modesto, CA 95353	When was the debt incurred?	Opened 01/14 Last Active 11/13				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharin					
	□Yes	Other. Specify Medical De					
4.5	State Collection Service Nonpriority Creditor's Name	Last 4 digits of account number	4104		\$239.00		
	Po Box 6250 Madison, WI 53716	When was the debt incurred?	Opened 09/11 La 02/11	ast Active			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	□ voc	Nedical Debt Northern II Fme					

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State Collection Service	Last 4 digits of account number	4283	\$1
Nonpriority Creditor's Name			
Po Box 6250 Madison, WI 53716	When was the debt incurred?	Opened 03/13 Last Active 09/12	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	on plans, and other similar debts	
□ Yes	· ·	Attorney Northwest Comm	
State Collection Service	Last 4 digits of account number	4282	\$1
Nonpriority Creditor's Name	_		
Po Box 6250 Madison, WI 53716	When was the debt incurred?	Opened 03/13 Last Active 09/12	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	Student loans		
ls the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Collection Physician	Attorney Northwest Comm Assn	
State Collection Service	Last 4 digits of account number	4281	\$2
Nonpriority Creditor's Name		Opened 03/13 Last Active	
Po Box 6250 Madison, WI 53716	When was the debt incurred?	09/12	
Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	Пол		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans		
□ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
_	_ Collection	Attorney Northwest Comm	
Yes	Other. Specify Physician A		

Part 3: List Others to Be Notified About a Debt That You Already Listed

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Debtor 1 Nerijust Surdokas

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	28,436.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	28,436.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	40,398.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	40,398.00

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		I AUGUITIE.	III FAUE 33 UL 1 U	
Fill in this info	rmation to identify your	case:		
Debtor 1	Nerijust Surdoka	s		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the output of the control of the co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					_
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	Jily		Cidio		

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Fill in th	is information to identify you	r case:			
Debtor 1	Nerijust Surdok	ne.			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	,				
Case nur	mber				— 0
(II KIIOWII)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
	dule H: Your Cod	lobtoro			40/45
Sche	dule n. Your Cod	aebiors			12/15
our nam	ne and case number (if knowr	n). Answer every question			of any Additional Pages, write
☐ Ye					
Arizo	ithin the last 8 years, have yo ona, California, Idaho, Louisiana o. Go to line 3.				states and territories include
_	es. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in lir Forn	ne 2 again as a codebtor only n 106D), Schedule E/F (Officia Column 2.	if that person is a guaran	tor or cosigner. Make	sure you have listed the 06G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Check all schedules	litor to whom you owe the debt that apply:
2.1				Cabadula D lina	
3.1	Name			□ Schedule D, line □ Schedule E/F, lin	
				☐ Schedule E/F, IIII	
				Scriedule G, line	
	Number Street	Chata	ZID Code		
	City	State	ZIP Code		
				Под 11 5 "	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, lin	
				☐ Schedule G, line	
	Number Street	_		_	
	City	State	ZIP Code		

Schedule H: Your Codebtors

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C:II	in this information to identify you	* 00001				Ī				
	in this information to identify you otor 1 Nerijust S									
	otor 2									
Uni	ted States Bankruptcy Court for	he: NORTHERN DISTRI	CT OF ILLINOIS		_					
	se number nown)		-			Check if this	nded filing	o a no otnotition	obontor	
_								ng postpetition following date:		
	fficial Form 106l chedule I: Your In					MM / DI)/ YYYY			
Be a sup spo atta	plying correct information. If you see . If you are separated and you a separated and you a separate sheet to this formation. If you are separated and you are separated and you are separated sheet to this formation.	ossible. If two married peo ou are married and not fili our spouse is not filing w n. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing with you, i on about your	nclude infor spouse. If m	mation about ore space is	your needed,	
1.	Fill in your employment information.		Debtor 1			Debte	or 2 or non-f	filing spouse		
	If you have more than one job, attach a separate page with information about additional employers.	parate page with Employment status		■ Employed□ Not employed				☐ Employed ☐ Not employed		
		Occupation	Self-employed contractor							
	Include part-time, seasonal, or self-employed work.	Employer's name	Self-employed	contrac	tor					
	Occupation may include studer or homemaker, if it applies.	Employer's address	2710 Dove Stre Rolling Meadov		0008	.				
		How long employed t	here? 2002 to	presei	nt					
Par	t 2: Give Details About N	Ionthly Income								
	mate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to i	report for	any	line, write \$0 in	he space. In	nclude your no	n-filing	
	u or your non-filing spouse have e space, attach a separate sheet		ombine the information	on for all	emplo	oyers for that pe	rson on the I	lines below. If	you need	
						For Debtor 1		ebtor 2 or ling spouse		
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.0	o \$	N/A		
3.	Estimate and list monthly ov	ertime pay.		3.	+\$	0.0	<u> </u>	N/A		
4.	Calculate gross Income. Add	I line 2 + line 3.		4.	\$	0.00	\$	N/A		

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Deb	tor 1	Nerijust Surdokas	-	С	ase	number (if know	vn)				
						Debtor 1			Debtor filing s	2 or spouse	
	Cop	by line 4 here	4.		\$_	0.0	00	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	0.0	00	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	١.	\$_	0.0	00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$	0.0	00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$_	0.0		\$		N/A	_
	5e.	Insurance	5e		\$	0.0		\$		N/A	_
	5f.	Domestic support obligations Union dues	5f.		\$_ \$	0.0		\$		N/A	_
	5g. 5h.	Other deductions. Specify:	5g 5h		^Ф _	0.0	_	+ \$		N/A N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		Ψ_ \$			· •			_
		·			<u> </u>	0.0		· 		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	•	\$_	0.0	<i>)</i> 0	\$		N/A	<u> </u>
8.	List 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			•	. ===		•			
	Oh	monthly net income. Interest and dividends	8a		\$_ \$	1,587.0		\$		N/A	_
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent	8b	٠.	Φ_	0.0	JU_	Φ		N/A	1
	00.	regularly receive Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	8c		\$	0.0	00	\$		N/A	1
	8d.	Unemployment compensation	8d	l.	\$_	0.0	00	\$		N/A	
	8e.	Social Security	8e) .	\$	0.0	00	\$		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		\$	0.0	00	\$		N/A	
	8g.	Pension or retirement income	8g	١.	\$	0.0	00	\$	-	N/A	<u> </u>
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0.0	00	+ \$		N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		1,587.0	00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,587.00 +	\$		N/A	= \$	1,587.00
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		1,367.00	Ψ-		IN/A		1,367.00
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe			•				e <i>J</i> . +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	1,587.00
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
		No.	-								

Official Form 106I Schedule I: Your Income page 2

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Em :	n this information to identify your ca	250.				
Debt				Charl	c if this is:	
Debt	Nerijust Surdoka	as			An amended filing	
Debt						ving postpetition chapter the following date:
(Spo	use, if filing)				rs expenses as or	the following date:
Unite	ed States Bankruptcy Court for the: N	ORTHERN DISTRICT OF ILLING	OIS	N	MM / DD / YYYY	
1	e number oown)					
Of	ficial Form 106J					
Sc	hedule J: Your Ex	penses				12/15
info	as complete and accurate as pos rmation. If more space is needec nber (if known). Answer every qu	d, attach another sheet to this f	e filing together, bot form. On the top of a	th are equa any addition	lly responsible fo nal pages, write y	or supplying correct your name and case
Part		i				
1.	Is this a joint case?					
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a s	canarata hausahald?				
	□ Yes. Does Debtor 2 live in a s	separate nousenoiu?				
	=	Official Form 106J-2, Expenses	for Separate Househ	old of Debto	or 2.	
2.	Do you have dependents?	No				
		Yes. Fill out this information for each dependent	Dependent's relatio Debtor 1 or Debtor 2		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No
						☐ Yes ☐ No
						☐ Yes
						□ No
						☐ Yes
3.	Do your expenses include expenses of people other than	■ No				
	yourself and your dependents?	√ □ Yes				
Part	2: Estimate Your Ongoing M	Ionthly Expenses				
Esti expe	mate your expenses as of your benses as of a date after the bank licable date.	pankruptcy filing date unless ye				
the	ude expenses paid for with non- value of such assistance and ha icial Form 106l.)				Your expe	enses
(0	iolai i omi roon,					
4.	The rental or home ownership of payments and any rent for the group	•	nclude first mortgage	4. \$		800.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or			4b. \$		0.00
	4c. Home maintenance, repair,			4c. \$	-	50.00
5	4d. Homeowner's association of Additional mortgage payments		me equity loans	4d. \$ 5. \$		0.00

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Deptor 1 Ner	ijust Surdokas	Case num	iber (if known)	
6. Utilities:				
	etricity, heat, natural gas	6a.	\$	0.00
	er, sewer, garbage collection	6b.	· -	0.00
	ephone, cell phone, Internet, satellite, and cable services	6c.		200.00
	er. Specify:	6d.	·	0.00
	housekeeping supplies	7.	· -	400.00
	and children's education costs	8.	\$	0.00
	laundry, and dry cleaning	9.	·	50.00
•	care products and services	10.		30.00
	nd dental expenses			
	•	11.	\$	50.00
	ation. Include gas, maintenance, bus or train fare. lude car payments.	12.	\$	250.00
	nent, clubs, recreation, newspapers, magazines, and books	13.	· i	25.00
	e contributions and religious donations	14.	· -	0.00
5. Insurance	•	14.	Ψ	0.00
	lude insurance deducted from your pay or included in lines 4 or 20.			
15a. Life		15a.	\$	0.00
	Ith insurance	15b.	·	0.00
	icle insurance	15c.	·	0.00
	er insurance. Specify:	15d.		0.00
	not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	Income taxes	16.	\$	500.00
	nt or lease payments:	47:	Ф.	0.00
	payments for Vehicle 1	17a.	· -	0.00
	payments for Vehicle 2	17b.	*	0.00
	er. Specify:	17c.		0.00
	er. Specify:	17d.	\$	0.00
	ments of alimony, maintenance, and support that you did not report a		\$	0.00
	from your pay on line 5, Schedule I, Your Income (Official Form 106I)).	\$	
Specify:	ments you make to support others who do not live with you.	19.	Φ	0.00
' ' -	property expenses not included in lines 4 or 5 of this form or on Sch		our Incomo	
	tgages on other property	20a.		0.00
	l estate taxes	20a. 20b.	·	0.00
		20c.	· -	
	perty, homeowner's, or renter's insurance	20d.	· ·	0.00
	ntenance, repair, and upkeep expenses		·	0.00
	neowner's association or condominium dues	20e.	·	0.00
1. Other: Sp	еспу:	21.	+\$	0.00
	your monthly expenses			• • • • • • • • • • • • • • • • • • • •
	ines 4 through 21.		\$	2,355.00
22b. Copy	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add li	ne 22a and 22b. The result is your monthly expenses.		\$	2,355.00
	your monthly net income.			
	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,587.00
23b. Cop	y your monthly expenses from line 22c above.	23b.	-\$	2,355.00
23c. Sub	tract your monthly expenses from your monthly income.			700.00
	result is your monthly net income.	23c.	\$	-768.00
For example	expect an increase or decrease in your expenses within the year after year, do you expect to finish paying for your car loan within the year or do you expect you to the terms of your mortgage?			ase or decrease because of a
■ No.				
☐ Yes.	Explain here:			

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Fill in this infor	mation to identify your	case:			
Debtor 1	Nerijust Surdoka	S			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIg)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				_	eck if this is an ended filing
Official Forr	m 106Dec				
Declarat	tion About a	an Individual	Debtor's Scl	hedules	12/15
·	8 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	n Below				
Did you pa	ay or agree to pay some	eone who is NOT an attorr	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. I	Name of person			Attach Bankruptcy Petition Declaration, and Signature	
	alty of perjury, I declare e true and correct.	that I have read the sumr	mary and schedules filed	with this declaration and	
X /s/ Ner	rijust Surdokas		X		
Nerijus	st Surdokas ire of Debtor 1		Signature of D	Debtor 2	
Date	May 9, 2017		Date		

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Fill in	this inform	ation to identify you	r case:			
Debto	or 1	Nerijust Surdoka	Middle Name	Last Name		
Debto	or 2	riist Name	wilddie Name	Lastivallie		
(Spous	e if, filing)	First Name	Middle Name	Last Name		
Unite	d States Ban	kruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
Case	number					
(if know						Check if this is an
						amended filing
~ "						
	cial For				_	
Stat	ement	of Financial	Affairs for Individ	duals Filing for E	Bankruptcy	4/10
			ble. If two married people a attach a separate sheet to			
). Answer every que		this form. On the top of an	y additional pages, write yo	our name and case
Part '	Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1. V	vnat is your	current marital statu	15 f			
	-					
	Not marr	ried				
2. D	uring the la	st 3 years, have you	lived anywhere other than	where you live now?		
] No					
	Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	٧.	
	Debtor 1 Pri	or Address:	Dates Debtor 1	Debtor 2 Prior Ad	ddress:	Dates Debtor 2
			lived there	_		lived there
		icago Ave. Heights, IL 60004	From-To: 2007 to Jan. 2	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
-		.o.go, oooo :				
3. V	lithin the la	st 8 years, did you e	ver live with a spouse or leg	nal equivalent in a commun	nity property state or territo	rv? (Community property
			lifornia, Idaho, Louisiana, Ne			
	No					
	_	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
Part 2	Explair	n the Sources of You	r Income			
			nployment or from operatin			endar years?
			u received from all jobs and a have income that you receive			
-	7 No.		·			
		in the details.				
_	- 163.1111	in the details.				
			Debtor 1	0	Debtor 2	0
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$15,000.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Nerijust Surdokas

				Debtor 1			Debtor 2			
				Sources of income Check all that apply.	(bef	ss income ore deductions and usions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31,		31, 2016)	☐ Wages, commission bonuses, tips	S,	\$35,654.00	☐ Wages, combonuses, tips	imissions,			
				Operating a busines	S		☐ Operating a	business		
		dar year bet December :		☐ Wages, commission bonuses, tips	S,	\$33,675.00	☐ Wages, combonuses, tips	ımissions,		
				Operating a busines	S		☐ Operating a	business		
5.	Include in and other winnings. List each	come regard public benef If you are fili source and th	less of wheth it payments; ing a joint cas he gross inco	e during this year or the er that income is taxable, pensions; rental income; e and you have income to me from each source sep	Examples interest; div	of other income are idends; money colle eived together, list it	alimony; child supp cted from lawsuits; only once under De	royalties; and ebtor 1.		
	☐ Yes.	Fill in the de	tails.							
				Debtor 1 Sources of income Describe below.	eacl (bef	ss income from n source ore deductions and usions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed	for Bankru	iptcy				
6.	Are eithe ☐ No.	Neither Deindividual puring the No.	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include	ebtor 2 has primarily consuments of personal, family, or house re you filed for bankrupto ach creditor to whom you editor. Do not include pay payments to an attorney on 4/01/19 and every 3 your enterty and every 3 years.	pnsumer desemble purposes, did you purposes a total ments for deforthis bank	ebts. Consumer debose." ay any creditor a total of \$6,425* or more lomestic support oblikruptcy case.	al of \$6,425* or mo in one or more pay gations, such as ch	re? /ments and th nild support and	ne total amount you nd alimony. Also, do	
	Yes.			Debtor 2 or both have primarily consumer debts. 0 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?						
		■ No. □ Yes	include payı	ach creditor to whom you ments for domestic suppo this bankruptcy case.						
	Creditor	's Name and	l Address	Dates of pa	yment	Total amount paid	Amount you still owe	Was this p	ayment for	
						-				

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7.	Within 1 year before you filed for bankrupture Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. ■ No □ Yes. List all payments to an insider.	artners; relatives of any generation control, or owner of 20%	neral partners; partne or more of their voting	erships of which you	ou are a genera any managing a	al partner; corporations gent, including one for
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider			any property on a	account of a d	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
Pai	t 4: Identify Legal Actions, Repossession	ns and Foreclosures	para		molado oroc	mor o riamo
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title	cy, were you a party in a				t or custody
	Case number					
10.	Within 1 year before you filed for bankrupt. Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garni		d, seized, or levied? Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details.		cluding a bank or fir	nancial institutio	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action th	e creditor took	Date take	action was	Amount
	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes List Certain Gifts and Contributions		erty in the possess			efit of creditors, a
13.	Within 2 years before you filed for bankrup No	etcy, did you give any gif	ts with a total value	of more than \$6	00 per person	?
	Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the g	s you gave gifts	Value
	Person to Whom You Gave the Gift and Address:					

5.	Case 17-14746 Doc	Document	Page 49 of 70		Main
Det	btor 1 Nerijust Surdokas		Case number	(if known)	
14.	Within 2 years before you filed for bank ■ No	ruptcy, did you give any	gifts or contributions with a tot	al value of more than	\$600 to any charity
	Yes. Fill in the details for each gift or	contribution.			
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		t you contributed	Dates you contributed	Valu
Par	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling? No Yes. Fill in the details.	uptcy or since you filed	for bankruptcy, did you lose any	thing because of thef	t, fire, other disaste
	Describe the property you lost and how the loss occurred	Include the amount that	te coverage for the loss insurance has paid. List pending a 33 of Schedule A/B: Property.	Date of your loss	Value of property los
Por	rt 7: List Certain Payments or Transfer		, ,		
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details.	preparing a bankruptcy	petition?		ty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	transferred	nd value of any property	Date payment or transfer was made	Amount o paymen
	Kaplan Law Offices, P.C. 3400 Dundee Road Suite 150 Northbrook, IL 60062 alex@alexkaplanlegal.com	Attorney Fee	es & costs	March 3, 2017	\$1,900.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that	editors or to make payme		or transfer any propei	ty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address	Description at transferred	nd value of any property	Date payment or transfer was made	Amount o

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

☐ Yes. Fill in the details.

Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you

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Debtor 1 **Nerijust Surdokas**

19.	beneficia	0 years before you filed for bankrup ary? (These are often called asset-pro		ny property to a	self-settle	d trust or similar devic	e of v	which you are a
	■ No □ Yes	. Fill in the details.						
	Name o	f trust	Description and	value of the pro	perty trans	sferred		Date Transfer was
Pai	t 8: Lis	st of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and S	torage Unit	ts		
20.	sold, mo	year before you filed for bankrupto ved, or transferred? checking, savings, money market, o pension funds, cooperatives, asso	or other financial accou	nts; certificates	s of deposi	•	•	, ,
	☐ Yes	. Fill in the details.						
		f Financial Institution and S (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred		Last balance before closing or transfer
21.	-	now have, or did you have within 1 other valuables?	year before you filed fo	r bankruptcy, a	ny safe de	posit box or other depo	ositor	ry for securities,
	■ No							
	☐ Yes	. Fill in the details.						
		f Financial Institution S (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents		Do you still have it?
22.	Have yo	u stored property in a storage unit o	or place other than you	r home within 1	year befo	re you filed for bankrup	otcy?	
	■ No							
	_	. Fill in the details.						
		f Storage Facility 5 (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents		Do you still have it?
Pa	t 9:	entify Property You Hold or Control	for Someone Else					
23.	Do you h	nold or control any property that so cone.	meone else owns? Incl	ude any proper	rty you bor	rowed from, are storing	g for,	or hold in trust
	■ No							
	☐ Yes	. Fill in the details.						
	Owner's	S Name S (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property		Value
Pa	t 10: Gi	ve Details About Environmental Info	ormation					
For	the purpo	ose of Part 10, the following definiti	ons apply:					
	toxic sul	mental law means any federal, state ostances, wastes, or material into to ons controlling the cleanup of these	he air, land, soil, surfac	e water, ground				
	Site mea	ns any location, facility, or property operate, or utilize it, including dispo	y as defined under any		law, wheth	er you now own, opera	ate, o	r utilize it or used
		us material means anything an env		as a hazardous	s waste, ha	zardous substance, to	xic s	ubstance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Nerijust Surdokas

24.	Has any governmental unit notified you that y	you may be liable or potentially liable	under or in violation of an environme	ntal law?		
	No					
	Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of a	ny release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admi	inistrative proceeding under any envi	ironmental law? Include settlements a	nd orders.		
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t11: Give Details About Your Business or C	onnections to Any Business				
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have an	ny of the following connections to any	business?		
	■ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time			
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnersh	ip (LLP)			
	☐ A partner in a partnership					
	☐ An officer, director, or managing exe	cutive of a corporation				
	_	☐ An owner of at least 5% of the voting or equity securities of a corporation				
	□ No. None of the above applies. Go to Pa					
	Yes. Check all that apply above and fill in		•			
	,	Describe the nature of the business	Employer Identification number Do not include Social Security r			
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed			
	2710 Dove Street	Self employed contractor/sub-contractor	EIN: xxx-xx-3998			
		Agnieszka Szmuc Alpha & Omega Accounting & Boks, Ltd. 2720 S. River Road, Ste. 244	From-To 2002 to present			
		Des Plaines, Illinois 60018				
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	y, did you give a financial statement t	to anyone about your business? Inclu	de all financial		
	■ No					
	Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				

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Part '	2: Sign Below		
are tru	e and correct. I understand th	ment of Financial Affairs and any attachments, and I declare under penalty of p t making a false statement, concealing property, or obtaining money or proper lines up to \$250,000, or imprisonment for up to 20 years, or both.	
/s/ N	erijust Surdokas		
Nerijust Surdokas		Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	May 9, 2017	Date	
Did yo	ou attach additional pages to Y	our Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official	Form 107)?
■ No			
☐ Yes	3		
Did yo	ou pay or agree to pay someon	who is not an attorney to help you fill out bankruptcy forms?	
■ No			

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

connection

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Debtor 1	Nerijust Surdokas			
	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	NORTHERN DISTR	CICT OF ILLINOIS	
ase number known)				☐ Check if this is an amended filing
Official Fo		a for Indivi	duals Filing Under Chapte	r 7
			and in ing officer officer	f / 12/15
ou must file th which on the two married p sign a e as complete write y	ever is earlier, unless the form people are filing together and date the form.	thin 30 days after you court extends the sin a joint case, both e. If more space is r	expired. bu file your bankruptcy petition or by the date set time for cause. You must also send copies to the are equally responsible for supplying correct infected, attach a separate sheet to this form. On the contract of the supplying correct infected, attach a separate sheet to this form.	creditors and lessors you list ormation. Both debtors must
information b		Secured Claims	Creditors Who Have Claims Secured by Property What do you intend to do with the property that secures a debt?	(Official Form 106D), fill in the Did you claim the propert
information b	itors that you listed in Pa pelow.	Secured Claims	What do you intend to do with the property that secures a debt?	(Official Form 106D), fill in the Did you claim the propert
information be Identify the c	itors that you listed in Pa pelow.	Secured Claims	What do you intend to do with the property that	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C
information be ldentify the concentration of the co	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	(Official Form 106D), fill in the Did you claim the proper as exempt on Schedule C
information be identify the concentration in the co	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C
Information be Identify the concentration of the Co	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C
Creditor's name: Description o property securing debt	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C □ No □ Yes
Creditor's name: Description or property securing debte Creditor's	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C
Creditor's name: Description o property securing debt	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C
Creditor's name: Description o property securing debt	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and redeem it.	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C □ No □ Yes
Creditor's name: Description o property securing debt Creditor's name:	itors that you listed in Pa below. reditor and the property th	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C
Creditor's name: Description or property securing debta Creditor's name: Description or property securing debta Creditor's name: Description or property securing debta Creditor's name:	itors that you listed in Papelow. reditor and the property the	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C
Information be Identify the control of the Control	itors that you listed in Papelow. reditor and the property the	Secured Claims	What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	(Official Form 106D), fill in the Did you claim the propert as exempt on Schedule C

Official Form 108

Creditor's

Description of

securing debt:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

☐ Yes

☐ No

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Debtor 1	Nerijust Surdokas	Case number (if known)	
prope	ption of	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
in the inf	ormation below. Do not list real estate I	y Leases you listed in Schedule G: Executory Contracts and Unexpire eases. Unexpired leases are leases that are still in effect; the y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leas	ses	Will the lease be assumed?
Lessor's Descripti Property	on of leased		□ No □ Yes
Lessor's Descripti Property	on of leased		□ No □ Yes
Lessor's Descripti Property	on of leased		□ No □ Yes
Lessor's Descripti Property	on of leased		□ No □ Yes
Lessor's Descripti Property	on of leased		□ No □ Yes
Lessor's Descripti Property	on of leased		□ No □ Yes
Lessor's Descripti Property	on of leased		□ No □ Yes
property X /s/ Ne	Sign Below nalty of perjury, I declare that I have independent that is subject to an unexpired lease. Nerijust Surdokas rijust Surdokas nature of Debtor 1	dicated my intention about any property of my estate that sec	cures a debt and any personal
Dat	e Mav 9. 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
·	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-14746 Doc 1 Filed 05/11/17 Entered 05/11/17 08:59:10 Desc Main Document Page 59 of 70

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Nerijust Surdokas		Case N		
		Debtor(s)	Chapte	er <u>7</u>	
	DISCLOSURE OF COMPENS	SATION OF ATTOR	RNEY FOR	DEBTOR(S)	
c	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), ompensation paid to me within one year before the filing of e rendered on behalf of the debtor(s) in contemplation of o	of the petition in bankruptcy,	or agreed to be p	aid to me, for services re	
	For legal services, I have agreed to accept		\$	1,565.00	
	Prior to the filing of this statement I have received		\$	1,565.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed compens	ation with any other person	unless they are n	nembers and associates of	f my law firm.
[☐ I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names				aw firm. A
5. I	n return for the above-disclosed fee, I have agreed to rende	er legal service for all aspects	s of the bankrupt	cy case, including:	
b c	 Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statemed Representation of the debtor at the meeting of creditors at [Other provisions as needed] Negotiations with secured creditors to rede 	ent of affairs and plan which and confirmation hearing, an	may be required ad any adjourned	; hearings thereof;	
	reaffirmation agreements and applications		inpuon pianin	ng, preparation and i	illing of
7. E	by agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any disch any other adversary proceeding; preparation of liens on household goods.	argeability actions, judio	cial lien avoida		
	(CERTIFICATION			
	certify that the foregoing is a complete statement of any agankruptcy proceeding.	greement or arrangement for	payment to me f	or representation of the c	lebtor(s) in
	ay 9, 2017	/s/ Alexey Y. Kapl			
Da	nte	Alexey Y. Kaplan Signature of Attorne		Offices, P.C.) 6272494	+
		Kaplan Law Offic	es, P.C.		
		3400 Dundee Roa Suite 150	Ia		
		Northbrook, IL 60			
		(847) 509-9800 F alex@alexkaplanl		779	
		Name of law firm	· J		

United States Bankruptcy Court Northern District of Illinois

In re	Nerijust Surdokas		Case No.			
		Debtor(s)	Chapter 7			
	VERIFICATION OF CREDITOR MATRIX					
		Number of	Creditors:	58		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to t	he best of my		
Date:	May 9, 2017	/s/ Nerijust Surdokas Nerijust Surdokas Signature of Debtor				

Armor Systems Co 1700 Kiefer Dr Ste 1 Zion, IL 60099

ARS/Account Resolution Specialist Po Box 459079 Sunrise, FL 33345

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ARS/Account Resolution Specialist Po Box 459079 Sunrise, FL 33345

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364 Cda/Pontiac Attn:Bankruptcy Po Box 213 Streator, IL 61364

Choice Recovery Inc 1550 Old Henderson Rd Ste 100 Columus, OH 43220

Commonwealth Financial Systems 245 Main St Dickson City, PA 18519

Commonwealth Financial Systems 245 Main St Dickson City, PA 18519

Harris & Harris 111 W Jackson Blvd Suite 400 Chicago, IL 60604

IC Systems, Inc 444 Highway 96 East St Paul, MN 55127

ICS/Illinois Collection Service Po Box 1010 Tinley Park, IL 60477

Illinois Depart of Revenue PO Box 19025 Springfield, IL 62794-9025

Illinois Depart of Revenue PO Box 19025 Springfield, IL 62794-9025

Internal Revenue Service PO Box 970006 Saint Louis, MO 63197-0006

M3 Financial Services 10330 W Roosevelt Rd. Suite 200 Westchester, IL 60154 Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

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Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Med Business Bureau 1460 Renaissance Dr #400 Park Ridge, IL 60068

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606 Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

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Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Midland Funding c/o Blatt Hasenmiller Leibsker & M 125 S. Wacker Drive, Ste. 400 Chicago, IL 60606

Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

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Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148 Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

Miramed Revenue Group 991 Oak Creek Dr Lombard, IL 60148

Northwest Collectors 3601 Algonquin Rd Ste 232 Rolling Meadows, IL 60008

Stanislaus Credit Control Service, Inc. Po Box 480 Modesto, CA 95353

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Stanislaus Credit Control Service, Inc. Po Box 480 Modesto, CA 95353

Stanislaus Credit Control Service, Inc. Po Box 480 Modesto, CA 95353

State Collection Service Po Box 6250 Madison, WI 53716

State Collection Service Po Box 6250 Madison, WI 53716

State Collection Service Po Box 6250 Madison, WI 53716

State Collection Service Po Box 6250 Madison, WI 53716

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United States Bankruptcy Court Northern District of Illinois

In re	Nerijust Surdokas			Case No.		
		Debtor(s)	C	hapter	7	
	BUSINESS INC	OME AND I	TYDENCE	'C		
г					1, 1, 4, 1, 1	
	INANCIAL REVIEW OF THE DEBTOR'S BUSINES		<u>CLUDE</u> informatio	on directly	related to the busi	ness operation.)
PART	A - GROSS BUSINESS INCOME FOR PREVIOUS 1	12 MONTHS:	_	_		
	1. Gross Income For 12 Months Prior to Filing:		\$	3	5,654.00	
PART	B - ESTIMATED AVERAGE FUTURE GROSS MO	NTHLY INCOME:				
	2. Gross Monthly Income				\$	3,000.00
PART	C - ESTIMATED FUTURE MONTHLY EXPENSES	:				
	3. Net Employee Payroll (Other Than Debtor)		\$		0.00	
	4. Payroll Taxes				0.00	
	5. Unemployment Taxes		_		0.00	
	6. Worker's Compensation				0.00	
	7. Other Taxes				0.00	
	8. Inventory Purchases (Including raw materials)				0.00	
	9. Purchase of Feed/Fertilizer/Seed/Spray				0.00	
	10. Rent (Other than debtor's principal residence)				0.00	
	11. Utilities				0.00	
	12. Office Expenses and Supplies				0.00	
	13. Repairs and Maintenance				0.00	
	14. Vehicle Expenses		_		0.00	
	15. Travel and Entertainment				0.00	
	16. Equipment Rental and Leases				0.00	
	17. Legal/Accounting/Other Professional Fees				0.00	
	18. Insurance				0.00	
	19. Employee Benefits (e.g., pension, medical, etc.)				0.00	
	20. Payments to Be Made Directly By Debtor to Secured Creditors	For Pre-Petition Busine	ss Debts (Specify)	:		
	DESCRIPTION		TOTAL			
	Car & truck expenses		791.00			
	Meals & entertainment		91.00			
	Utilities		35.00			
	Cell phone Uniforms		131.00 124.00			
	Laundry		62.00			
	Tools		179.00			
	21. Other (Specify):					
	DESCRIPTION		TOTAL			
	22. Total Monthly Expenses (Add items 3-21)				\$	1,413.00
PART	D - ESTIMATED AVERAGE NET MONTHLY INC	OME:				·
	23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from				\$	1,587.00

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STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. §341

INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Trustee, United States Department of Justice, has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of...

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This information sheet contains only general principles of law and is not a substitute for legal advice. If you have questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed on your bankruptcy schedules. A discharge is a court order that says you do not have to repay your debts, but there are a number of exceptions. Debts which may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to pay any debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying any debts that were not listed on your bankruptcy schedules or that you incurred after you filed for bankruptcy.

WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document, which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court within 60 days after the first meeting of the creditors.

Reaffirmation agreements are strictly voluntary — they are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues your discharge order or within sixty (60) days after the reaffirmation agreement was filed with the court, whichever is later. If you reaffirm a debt and fail to make the payments required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any remaining debt.

OTHER BANKRUPTCY OPTIONS

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtor's farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtor must pay the chapter 13 trustee the amounts set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,347,500 (\$336,900 in unsecured debts and \$1,010,650 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

/s/ Nerijust Surdokas	May 9, 2017			
Debtor's Signature	Date			

11 U.S.C. § 527(a)(2) Disclosure

In accordance with section 527(a)(2) of the Bankruptcy Code, be advised that:

- 1. All information that you are required to provide with a bankruptcy petition and during a bankruptcy case must be complete, accurate, and truthful.
- 2. All assets and liabilities must be completely and accurately disclosed, with the replacement value of each asset as defined in section 506 listed after reasonable inquiry to establish such value.
- 3. Current monthly income, the amounts specified in the "means test" under section 707(b)(2), and disposable income in chapter 13 cases must be stated after reasonable inquiry.
- 4. Information that you provide during your bankruptcy case may be audited, and the failure to provide such information may result in dismissal of the case or other sanction, including a criminal sanction.

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER.

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules, and Statement of Financial Affairs, and in some cases a Statement of Intention, need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of the creditors where you may be questioned by a court official called a 'trustee' and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.